



1646

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Arispe et al.

Docket No.: PF453P3

Application No.: 09/989,687

Group Art Unit: 1646

Filed: November 21, 2001

Examiner: Canela, K.

For: METH 1 and METH 2 Polynucleotides and
Polypeptides

PROVISIONAL ELECTION UNDER 37 C.F.R. § 1.143

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

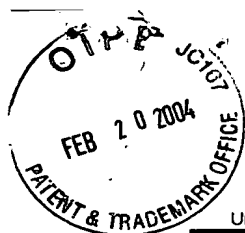
Dear Sir:

In response to the Office Action dated January 22, 2004, please consider the following provisional election and remarks. Applicants submit concurrently herewith a Fee Transmittal Sheet with appropriate fee.

Claims 1-4 are pending.

Amendments to the claims begin on page 2.

Remarks begin on page 4.



FEE TRANSMITTAL for FY 2004 <small>Effective 10/01/2003, Patent fees are subject to annual revision.</small>		Complete if Known		
		Application Number	09/989,687-Conf. #9708	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	November 21, 2001	
		First Named Inventor	Luisa Iruela Arispe	
		Examiner Name	K. Canella	
TOTAL AMOUNT OF PAYMENT (\$)		86.00	Art Unit	1642
			Attorney Docket No.	PF453P3
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)		
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES		
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 08-3425 Deposit Account Name: Human Genome Sciences, Inc.		Large Entity Small Entity		
The Director is authorized to: (check all that apply)		Fee Code Fee (\$)		
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments		Fee Code Fee (\$)		
<input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)		Fee Description		
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		Fee Paid		
FEE CALCULATION				
1. BASIC FILING FEE				
Large Entity Small Entity				
Fee Code Fee (\$)				
1001 770 2001 385				
1002 340 2002 170				
1003 530 2003 265				
1004 770 2004 385				
1005 160 2005 80				
SUBTOTAL (1) (\$)		0.00		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE				
Total Claims 8 -20** =				
Independent Claims 4 -3** =				
Multiple Dependent				
Large Entity Small Entity				
Fee Code Fee (\$)				
1202 18 2202 9				
1201 86 2201 43				
1203 290 2203 145				
1204 86 2204 43				
1205 18 2205 9				
SUBTOTAL (2) (\$)		86.00		
**or number previously paid, if greater; For Reissues, see above				
		Other fee (specify)		
		SUBTOTAL (3) (\$)		
		0.00		

SUBMITTED BY		(Complete if applicable)	
Name (Print/Type)	Janet M. Martineau	Registration No. (Attorney/Agent)	46,903
Signature		Telephone	(301) 315-2723
		Date	February 20, 2004